

BY REPRESENTATIVE HINES

1 A CONCURRENT RESOLUTION

2 To urge and request the Department of Health and Hospitals to study the effect of decreasing

3 Medicare-Medicaid crossover payments on dually eligible people with Medicare and

4 Medicaid in Louisiana and to report study findings and recommendations to the

5 legislature prior to the convening of the 2010 Regular Session.

6 WHEREAS, the Congressional Balanced Budget Act of 1997 made it essentially

7 illegal for one hundred eight thousand poor Medicare beneficiaries in Louisiana and five

8 million people across the nation to receive their full Medicare benefit; and

9 WHEREAS, all Medicare beneficiaries worked, paid payroll taxes, and earned the

10 same Medicare benefits; but the Balanced Budget Act allowed Louisiana and two-thirds of

11 all states to decrease their share of the Medicare payment for poor beneficiaries which

12 "crossed over" to Medicaid; and

13 WHEREAS, this Act created a two-tiered, discriminatory Medicare system where

14 wealthy beneficiaries receive full Medicare benefits while poor beneficiaries receive only

15 partial Medicare benefits; and

16 WHEREAS, poor Medicare beneficiaries typically have both Medicare and Medicaid

17 and are "dually eligible people"; and

18 WHEREAS, this segment of society are the oldest, poorest, sickest, and most

19 disabled people in the nation; and

1 WHEREAS, they are one-quarter of all Medicare beneficiaries over eighty-five years
2 old, they fill two-thirds of all nursing home beds, and they are one-quarter of all Medicare
3 beneficiaries in Louisiana; and

4 WHEREAS, in 2003, Tommy Thompson, secretary of the United States Department
5 of Health and Human Services, reported to Congress that decreasing Medicare-Medicaid
6 crossover payments for dually eligible people decreased their access to primary medical care
7 by five percent and decreased their access to mental health services by twenty-one percent;
8 and

9 WHEREAS, dually eligible people in Louisiana and nationwide are
10 disproportionately elderly minorities and mentally and physically disabled people; and

11 WHEREAS, decreasing health care access for these vulnerable, protected groups
12 violates the Civil Rights Act of 1964 and violates the Americans with Disabilities Act; and

13 WHEREAS, when access to primary care and mental health services decrease,
14 expensive emergency room visits, hospitalizations, and nursing home admissions increase;
15 and

16 WHEREAS, this practice increases health care costs for Louisiana and our nation;
17 and

18 WHEREAS, dually eligible Medicare beneficiaries have a preventable
19 hospitalization rate that is forty percent higher than beneficiaries who are not dually eligible;
20 and

21 WHEREAS, dually eligible Medicare beneficiaries are the most expensive
22 population served by publicly funded health care programs as their expense is more than four
23 times the expense of Medicare beneficiaries who do not have Medicaid; and

24 WHEREAS, total government spending on seven million dually eligible people
25 exceeds spending on all thirty million Medicare beneficiaries who do not have Medicaid;
26 and

27 WHEREAS, sixty percent of spending on dually eligible people is financed by state
28 Medicaid agencies; and

1 WHEREAS, in December 2008, the New Orleans City Council passed a resolution
2 requesting Louisiana to restore Medicare-Medicaid crossover payments so all Medicare
3 beneficiaries have equal access to their Medicare benefits; and

4 WHEREAS, the restoration of crossover payments is supported by the Louisiana
5 State Medical Society, Louisiana Geriatrics Society, Louisiana American Medical Directors
6 Association, American Geriatrics Society, New Orleans Medical Association, New Orleans
7 Council on Aging, the City of New Orleans Health Department, New Orleans NAACP, and
8 others; and

9 WHEREAS, restoring Medicare-Medicaid crossover benefits will improve access
10 for five million poor Medicare beneficiaries, stop civil rights violations, decrease health care
11 disparities, decrease national health care costs, and increase the number of primary care
12 physicians and mental health providers; and

13 WHEREAS, the Department of Health and Human Services, Centers for Medicare
14 and Medicaid Services, in its Civil Rights Compliance Policy Statement, pledged to abolish
15 discrimination in all its programs; CMS pledged to "allocate financial resources to the extent
16 feasible to ensure equal access; prevent discrimination; and assist in the remedy of past acts
17 adversely affecting persons on the basis of race, color, national origin, age, sex, or
18 disability"; and

19 WHEREAS, this is a national problem, and Louisiana and other states have financial
20 difficulty; and

21 WHEREAS, the United States Congress, which created the Balanced Budget Act,
22 can help Louisiana and other states restore crossover payments by supplying federal funds
23 without requiring state matching funds; and

24 WHEREAS, the Louisiana delegation in the United States Congress should seek to
25 restore Medicare-Medicaid crossover payments nationally so all Medicare beneficiaries in
26 Louisiana and nationwide have equal access to their Medicare benefits; and

27 WHEREAS, as the Department of Health and Hospitals conducts this study it should
28 incorporate a public review of the effect that the reduction of Medicare-Medicaid crossover
29 payments on dually eligible people has had on health care access for vulnerable populations
30 and on the total Louisiana health care costs.

1 THEREFORE, BE IT RESOLVED that the Legislature of Louisiana does hereby
2 urge and request the Department of Health and Hospitals to study the effect of decreasing
3 Medicare-Medicaid crossover payments on dually eligible people with Medicare and
4 Medicaid in Louisiana and report its findings to the legislature prior to the convening of the
5 2010 Regular Session.

6 BE IT FURTHER RESOLVED that a copy of this Resolution be transmitted to the
7 secretary of the Department of Health and Hospitals.

DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

Hines

HCR No. 171

Urges and requests the Dept. of Health and Hospitals to study the effect of decreasing Medicare-Medicaid crossover payments on dually eligible people with Medicare and Medicaid in La. and report its findings prior to the 2010 R.S.